FILING DATE APPLICANT(S) **CLAIMS ONLY** CLAIMS AFTER AFTER AS FILED 1st AMENDMENT 2nd AMENDMENT DEP. IND. DEP. IND. DEP. IND. IND. DEP. IND. OEP. IND. DEP. TOTAL IND. TOTAL IND. _1 _1 _1 _1 TOTAL DEP. TOTAL DEP.

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